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** CONTINUING DATA *****

This application is a CON of 09/686,004 10/10/2000 PAT 6,926,730

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWINGS 6	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 4
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

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TITLE

MINIMALLY INVASIVE VALVE REPAIR PROCEDURE AND APPARATUS

FILING FEE RECEIVED 746	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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